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## Externalizing shame responses in children: The role of fragile-positive self-esteem

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When faced with shame, children can either respond in submissive ways to withdraw from their environment or in externalizing ways to oppose their environment. This study tested the hypothesis that fragile-positive views of self predispose children to respond in externalizing ways to shame situations. Narcissism, actual and perceived social preference, global self-worth and propensity towards externalizing shame responding were measured in 122 pre-adolescent children. As expected, results revealed that narcissism, in contrast to global self-worth, was associated with externalizing shame responding. In addition, actual but not perceived social preference was inversely related to externalizing shame responding, suggesting that the social self-perceptions of children prone to employ externalizing shame responses may be inflated. Discussion focuses on the self-regulatory function of externalizing shame responses.

In the last two decades, researchers have made great progress in describing the developmental pathways of aggressive behaviour (e.g. Loeber & Hay, 1997; Moffitt, 1993). One robust finding was that early emerging individual differences in aggressive behaviour remain highly stable throughout the life-course. There is no better predictor of the likelihood that an adult will behave aggressively than whether that adult was aggressive as a child (e.g. Broidy *et al.*, 2003; Huesmann, Eron, Lefkowitz, & Walder, 1984). For that reason, research aimed at uncovering the mechanisms that cause early aggressive maladaptation seems highly important. Currently, much interest revolves around the emotion regulation processes involved in children's aggression. Most research focuses on the inadequate regulation of anger (e.g. Dearing *et al.*, 2002; Hubbard *et al.*, 2002). The present study seeks to expand on that literature by focusing on another emotional antecedent of aggression, namely shame. When shamefully exposed, children can engage in various responses, and one response is aggressing against those who caused or witnessed the shameful event. In this study, we aim to further our understanding of externalizing (i.e. angry and/or aggressive) shame responses by investigating individual differences in children's propensity to employ

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them. It is hypothesized that fragile forms of positive self-esteem predispose children to respond in externalizing ways to shame. Understanding why some children attempt to undo shame by opposing their environment whereas others respond in order to conform or get along, will enhance our insight into the maladaptive emotion regulation processes that are involved in children's aggressive behaviour.

### ***Shameful exposure and response strategies***

Shame typically results from situations that impose upon children an unwanted identity, prompting the acknowledgement that they are who they do not want to be (e.g. Gilbert, 1998; Lindsay-Hartz, De Rivera, & Mascolo, 1995; Olthof, Schouten, Kuiper, Stegge, & Jennekens-Schinkel, 2000). For example, situations in which children do not live up to behavioural standards, have insufficient control over their actions, or are incompetent in a particular domain, may all bring about shame (Olthof *et al.*, 2000). Importantly, research has shown that it is in particular the *public exposure* of such events that is experienced as shameful (Smith, Webster, Parrott, & Eyre, 2002). Being publicly exposed, ashamed individuals typically are concerned with how others evaluate the self. At the same time, they tend to focus their attention inwards and are acutely aware of the unwanted aspect of the self (Gilbert, 1998; Lewis, 1971). Often, this results in a negative appraisal of the entire self as incompetent, worthless or inferior, which accounts for the 'pain of shame' (Lewis, 1971). Both the situational antecedents and the phenomenological experience of shame are subject to developmental change. In toddlerhood, shame is experienced in response to failure situations (e.g. Mascolo & Fischer, 1995; Mills, 2005). Over the course of early and middle childhood, more situations become able to elicit shame, as children acquire more behavioural standards and become better able to evaluate themselves against those standards (Mills, 2005). Also, shame becomes more painful. It is only from pre-adolescence that negative self-appraisals become a pronounced aspect of the shame experience (Ferguson, Stegge, & Damhuis, 1991). By then, shame situations come to trigger an aversive emotional state that children urgently want to cease, which thus sets the stage for an immediate response.

Shame situations evoke various responses. The prototypical response is to hide or withdraw the self from the evaluating environment in order to escape painful exposure (e.g. Lindsay-Hartz *et al.*, 1995). This submissive response is thought to serve important interpersonal functions, like evoking forgiveness and sympathy in others and promoting the re-establishment of social bonds (Keltner & Harker, 1998). However, when expressed intensely or frequently, submissive response tendencies can become maladaptive and may lead to psychopathology (Ferguson, Stegge, Miller, & Olson, 1999; Tangney, Wagner, & Gramzow, 1992).

Besides the prototypical hiding or withdrawal response, a less obvious but (given the nature of shame) equally plausible response has been described in the shame literature. In her landmark volume *Shame and Guilt in Neurosis* (1971), Helen Lewis argued that shame situations often trigger a sense of 'humiliated fury'; intense feelings of hostility or anger that are elicited by being put in an inferior position. Because shame involves the awareness of others' disapproval, this humiliated fury is easily taken out on others. In line with Lewis' observations, other clinicians and theorists (e.g. M. Lewis, 1992; Scheff & Retzinger, 1991) posited that shame can cause people to project blame and anger on others, and can even form fertile ground for retaliative rage, violent attack or destructive conflict. Unfortunately, there have been few, if any, empirical studies that explicitly examined angry or aggressive responses to the situational antecedents of shame.

The general aim of the present study is to further our understanding of externalizing shame responses by investigating individual differences in children's propensity to employ them.

### **Function of externalizing shame responses**

In order to trace individual differences, more insight is needed in the function that externalizing shame responses may serve. With this objective, we widen our scope beyond the shame literature. Baumeister, Smart, and Boden (1996) argued that aggressive behaviours often arise from circumstances that threaten the aggressor's self-esteem. They argued that aggression can occur when ongoing external appraisals of the self are more negative than one's own appraisals of the self. This type of circumstance bears a close resemblance to what we suppose is the key situational trigger of shame; the public exposure of some negative aspect of the self, leading to an unwanted identity.

Baumeister *et al.* contended that when people are confronted with an ego-threat, they can deal with it in two ways; they either accept the threat or reject it. According to the model, acceptance of the ego-threat urges people to revise their self-esteem downwards. Negative internalized affect and withdrawal behaviours result from such a revision. The one response that is most relevant for the present purposes, however, is instigated by rejection of the ego-threat, taking it to be mistaken, undeserved or at least not damaging the self. In this way, people prevent themselves from a sudden drop of self-esteem and accompanying dysphoric affect. Instead, rejection of the ego-threat elicits anger or other negative affect aimed at the source of the negative evaluation. This affective response, in-turn, fuels aggressive or violent behaviours, that both compel the other person to withdraw the negative feedback and affirm the self by asserting superiority.

Applied to shame situations, this model yields the following picture. When shamefully exposed, some individuals do not internalize the ongoing external disapproval they anticipate. As such, they avoid negative self-reflection, so their self-esteem is maintained at a similar level. Instead of the pain of shame, feelings of hostility or anger are experienced, which trigger aggressive behaviours directed at the person(s) who brought about the situation. This notion suggests that externalizing shame responses are motivated in an attempt to avoid the state of negative self-regard and accompanying painful affect that is imposed by shame situations.

Now that we have an idea of the function that externalizing shame responses may serve, we may well be able to predict which individuals employ them. Here again, Baumeister *et al.* provided insight. They first referred to the literature on the motives that surround self-esteem to argue that losing esteem is especially threatening for high self-esteem individuals. Thus, the need to hold off the consequences of shameful exposure might be most urgent for them. However, Baumeister *et al.* were quick to add that high self-esteem individuals differ in how strongly their self-views are affected by ongoing self-relevant information: those that have fragile forms of positive self-esteem experience the strongest subjective impact of negative self-exposure. Accordingly, the prediction can be inferred that fragile-positive self-esteem predisposes children to respond in externalizing ways to shame situations. Several forms of fragile-positive self-esteem have been distinguished in the literature (e.g. Crocker & Wolfe, 2001; Kernis, 2003; Morf & Rhodewalt, 2001; Salmivalli, 2001). The most commonly studied construct is narcissism, but thus far, it has been rarely examined in children. In the child literature, most attention revolved around the construct of positively biased self-perception. In the following, both forms of fragile-positive self-esteem will be addressed.

**Two forms of fragile-positive self-esteem: Narcissism and positively biased self-perception**

Narcissistic personality disorders have been included in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV; American Psychiatric Association, 1994) as involving grandiose views of self, an inflated sense of entitlement, and exploitative attitudes towards others. Based on the diagnostic criteria, a trait scale called the Narcissistic Personality Inventory was developed for use with normal adult populations (Raskin & Terry, 1988; Raskin & Hall, 1979). Accordingly, narcissism is conceptualized in contemporary personality and social psychology as a personality dimension on which individuals in the general population vary (e.g. Campbell, Foster, & Finkel, 2002; Sedikides, Rudich, Gregg, Kumashiro, & Rusbult, 2004). There is considerable agreement that at the core of the narcissistic personality there is a positive yet fragile self-image (American Psychiatric Association, 1994; Kernberg, 1975; Morf & Rhodewalt, 2001). Morf and Rhodewalt reviewed the research literature and came to view narcissism as a self-regulatory system that is aimed at building or maintaining desired, grandiose selves. This conception suggests that the outstanding qualities that narcissists ascribe themselves might be the result of motivational factors rather than genuine conviction. As Bushman and Baumeister (1998) put it, narcissists may not be firmly convinced of these qualities, they just passionately want to hold them. It is easy to imagine that these insecurely held but much needed self-views are fragile, that is, vulnerable to anything that disconfirms them. Indeed, research showed that narcissistic individuals' self-esteem is much more subject to fluctuation than the self-esteem of less narcissistic individuals in response to external feedback (Rhodewalt, Madrian, & Cheney, 1998; Rhodewalt & Morf, 1998).

With respect to the developmental origins of narcissism, clinical theorists have long noted that narcissism arises as a reaction to dysfunctional early interactions with parents (Kernberg, 1975; Kohut, 1977; Millon, 1981). Recent empirical work found support for this notion (Otway & Vignoles, 2006). It was shown that childhood recollections of both parental over-valuation and parental coldness are predictive of adult levels of narcissism. Speculatively, narcissistic individuals may have learned in early development to continuously seek attention and admiration either to compensate for a lack of parental warmth or to be able to live up to parental expectations. Unfortunately, empirical data on how narcissism develops over childhood and adolescence into its mature form are still lacking. Some recent studies suggest, however, that meaningful individual differences in narcissism can be identified from the stage well before adolescence (Barry, Frick, & Killian, 2003; Frick, Bodin, & Barry, 2000; Washburn, McMahon, King, Reinecke, & Silver, 2004). This work provided preliminary evidence that narcissistic symptoms may be linked to childhood emotional and behavioural problems.

A second form of fragile-positive self-esteem, which generated more interest in the child literature, is positively biased self-perception (e.g. Brendgen, Vitaro, Turgeon, Poulin, & Wanner, 2004; David & Kistner, 2000; Hughes, Cavell, & Grossman, 1997). Positively biased self-perception can be generally defined as any kind of self-regard that is more positive than objective indicators warrant (David & Kistner, 2000). Young children typically have overly positive self-views (Harter, 1999; Marsh, Craven, & Debus, 1998). However, from middle childhood, children become better able to integrate positive and negative aspects of the self in their self-views. Also, they become better able to base their self-views on self-other comparisons. These cognitive acquisitions cause a developmental trend towards accuracy in children's self-perceptions from about 8 years of age (David & Kistner, 2000). Still, individual differences in perceptual bias remain,

ranging from underestimation of functioning (Cole, Martin, Peeke, Seroczynski, & Hoffman, 1998) to more extreme forms of overestimation. Relevant here is that such extreme forms of exaggerated, unwarranted or inflated self-perception will often be disconfirmed by accurate, day-to-day information children receive about the self (Baumeister *et al.*, 1996). For example, children who are less well liked by others than they think, will often be negatively surprised that others do not like to play with them. As argued by several researchers (e.g. Baumeister *et al.*, 1996; David & Kistner, 2000), the recurrent disconfirmation of one's self-perceptions typically results in a profound vulnerability to threatening social information.

Narcissism and positively biased self-perception are overlapping, but not identical constructs. Both constructs involve inflated, tentative views of self. However, narcissism involves many more characteristics than merely inflated views of self. Narcissistic self-views are associated with superiority (feeling better than others), entitlement (feeling more deserving than others) and a negative interpersonal orientation (not caring for or disliking others). Positively biased self-views are not necessarily rooted in interpersonal comparisons, and are not intertwined with entitlement or an adversarial interpersonal orientation. Still, both forms of self-view are assumed to be highly vulnerable to threatening social information.

### **Overview of the present study**

The general aim of the present study was to promote our understanding of externalizing shame responses by examining individual differences in children's propensity to employ them. A number of studies have verified in adult samples that people holding fragile forms of positive self-esteem tend to act aggressively in situations that threaten the self (e.g. Bushman & Baumeister, 1998; Stucke & Sporer, 2002; Twenge & Campbell, 2003). Few studies have addressed the link between fragile-positive self-esteem and aggression in children. This seems surprising, because childhood is the time when the foundation for possibly enduring aggressive behavioural styles is laid. Early in life, children are developing emotional and social scripts that guide their actions to difficult situations (e.g. Coie & Dodge, 1998). These scripts will influence their behaviour throughout their lifetime. Therefore, the question of what emotional processes underlie children's aggressive behaviour is of pivotal importance. It may be most effective to intervene with maladaptive routines to deal with emotionally arousing events before such routines become ingrained in one's adult personality. This study adds to earlier work in its objective to gain insight in the shame-related processes that underlie early patterns of aggressive maladaptation.

We choose to conduct the study in a sample of pre-adolescent children. Pre-adolescence is an ideal age-period for the purposes of this study. By this age, difficult and ego-threatening interpersonal situations are typically experienced as shameful due to developmental increases in the ability to evaluate the self against standards (Mills, 2005). Also, the opinions of others come to exert a stronger influence on children's self-views (Harter, 1999). Furthermore, shame is more pronouncedly marked by negative self-appraisals and consequently has a stronger impact on self-esteem in children this age than in younger children (Ferguson *et al.*, 1991). Finally, children have outgrown normative overestimation of competence by pre-adolescence, which allows for the meaningful assessment of individual differences in both narcissism and biased self-perception (e.g. David & Kistner, 2000; Thomaes, 2006).



Adhering to methodological standards in shame research, a self-report scenario-based instrument is included to assess children's propensity to employ externalizing shame responses. Scenarios of prototypical shame situations were selected from a pilot study based on their potency to elicit both shame and anger. In addition, a self-report and a peer nomination measure are included consisting of the same items describing externalizing shame responses in more general terms.

The first hypothesis to be tested is that narcissistic children are prone to respond in externalizing ways to shame situations. To assess narcissism in children, a developmentally appropriate self-report narcissism inventory is included. To be able to verify whether it is specifically narcissism--and not just high self-esteem--that accounts for tendencies to aggress, a measure of global self-worth is administered as well. Global self-worth refers to one's overall appraisal of one's value as a person (Harter, 1999). Adult research has shown that narcissism and self-worth are distinct constructs that have different interpersonal consequences (e.g. Brown & Zeigler-Hill, 2004; Bushman & Baumeister, 1998). However, it cannot be assumed *a priori* that similar findings will emerge for children. The second hypothesis that will be addressed is that children that hold positively biased self-perceptions are prone to respond in externalizing ways to shame situations. In line with most previous studies, we choose social preference as a domain in which to investigate positively biased self-perception. Not only do children attach great importance to their peer relationships and feelings of acceptance (David & Kistner, 2000), social preference also holds particular relevance because shame situations typically arise in interpersonal, status-dynamic contexts.

## Method

### Participants

Participants were 122 children (57 boys, 65 girls) from two elementary schools in medium-sized towns in The Netherlands. Their average age was 11.6 years ( $SD = 0.67$ ). Children came from families of mixed socio-economic, Caucasian backgrounds. After parents were informed about procedures and purposes of the study, all children were permitted to participate in the classroom testing part of the study. Three children did not receive parental permission to participate in the individual testing part (their parents did not want them to miss time in class). Consequently, analyses with the individually administered measures were based on data of 119 children (56 boys, 63 girls). All other analyses were based on data of the total sample.

### Procedure and dependent measures

#### Classroom testing part

In the first part of the study, paper-and-pencil measures were administered in classes. On day 1, children completed Harter's (1985) Self-Perception Profile for Children as well as the scenario-based instrument to measure children's propensity to employ externalizing shame responses. On day 2, children completed the narcissism inventory. The narcissism inventory was administered on a separate day because we wanted to preclude the possibility that narcissism scores would be confounded by same-day completion of another self-view measure (i.e. the Self-Perception Profile for Children). The measures were administered in Dutch.

### *Narcissism*

A 27-item self-report inventory aimed at measuring narcissism in children was constructed for the purposes of this study. All items were author-generated based on a thorough review of the literature. Aims were to formulate items that (a) describe normal and age-appropriate cognitions, affects and behaviours and (b) tap a comprehensive range of characteristics central to narcissism. For this last aim, items were based on the narcissism criteria listed in the DSM-IV. Importantly, we emphatically aimed to tone-down item formulations relative to the DSM-criterion descriptions. We converted criterion descriptions into narcissistic cognitions, affects and behaviours that children in normal populations may well show or have in their daily lives. The basic assumption is that when narcissistic characteristics are exhibited in such less extreme forms, they are reflective of narcissism as a personality trait (Emmons, 1987). Our inventory is comparable in measurement purpose and theoretical underpinnings to the Narcissistic Personality Inventory, which was constructed in a similar way (Raskin & Terry, 1988; Raskin & Hall, 1979). Sample items of our narcissism inventory include: 'Without me, our class would be much less fun', 'I love showing all the things I can do', 'Someone like me should be invited to everyone's birthday party', 'I am a very special person' and 'I am a great example for other kids to follow'. Instead of the forced-choice response format of the Narcissistic Personality Inventory (which forces respondents to agree with one of two response alternatives, even if they do not agree with either alternative), we chose a true-false response format. Initial validation showed our narcissism inventory to be positively associated with self-reported superiority, dominance, defensive coping and psychopathic personality traits, whereas it was negatively associated with self- and peer-reported empathy (Thomaes, 2006). Test-retest reliability over a 2-month interval was  $r = .77$ . In the present study, Cronbach's  $\alpha$  was .83.<sup>1</sup>

### *Externalizing shame responses: Scenarios*

A scenario-based self-report instrument to assess children's propensity to employ externalizing shame responses was developed for the purposes of this study. It consisted of five written scenarios of the child involved in a prototypical shame situation. All scenarios describe age-appropriate, day-to-day situations in which a publicly exposed unwanted identity (caused by saying stupid things, wearing wrong clothes, etc.) is evident. As a first step in the construction of the instrument, 19 scenarios describing prototypical shame situations were generated. In a pilot study, children rated their anticipated feelings of shame and anger in response to these scenarios on a 5-point Likert scale. Five scenarios were selected on their potency to elicit both shame and anger. Scored from 0 to 4, mean shame ratings for the selected scenarios ranged from 1.09 ( $SD = 1.12$ ) to 2.63 ( $SD = 1.24$ ), mean anger ratings ranged from 1.49 ( $SD = 1.22$ ) to 2.17 ( $SD = 1.33$ ). Thus, the final instrument consisted of five scenarios of prototypical shame situations that children indicated to be both shame and anger provoking. An example scenario: 'You are having a birthday party. When everybody has arrived, you put on your favourite music. Then one of your classmates

<sup>1</sup> Another instrument for the similar purpose of measuring narcissism in children was used by Barry et al. (2003). They re-worded the NPI (Raskin & Hall, 1979; Raskin & Terry, 1988), a measure of narcissism in adults, to make it more age-appropriate for children. We think this is a commendable approach, which has meant an improvement relative to using the original NPI with children. However, we preferred to take the Barry et al. approach one step further by developing a measure specially aimed to measure childhood manifestations of narcissism.



says: 'That's baby music, can't you put on something else?!'. Following each scenario, a description of an aggressive response directly aimed at the evaluating other person (physical or verbal) was presented. For instance, for the example scenario, we included the response; 'I would tell him/her to shut up'. Children were asked to indicate the probability that they would show a similar response in the situation, using a 5-point Likert scale (0, I would surely not act in this way to 4, I would surely act in this way). Scenario-based measures of shame responding have the advantage that they do not rely on children's understanding of the term 'shame', and discourage defensive responding. Adequate external validity has been found in previous studies (for a review, see Tangney & Dearing, 2002). Externalizing shame response scores were determined by averaging children's ratings across the scenarios. Cronbach's  $\alpha$  was .76. All five scenarios are included in the Appendix.

#### *Global self-worth*

Harter's Self-Perception Profile for Children (1985) was administered, of which the global self-worth subscale was used for analyses. This subscale consists of six items that assess the extent to which children are satisfied with themselves and the way they are leading their lives. In order to prevent difficulties that some children might have had using the original, two-step forced-choice response format, we used a modified response format (Brendgen, Vitaro, Turgeon, & Poulin, 2002; Brody, Murry, Kim, & Brown, 2002). Each item comprises a statement about how some children think or feel about themselves, and children are asked to indicate to what extent they are similar to these children, using a 4-point Likert scale (0, I am not like these children at all to 3, I am exactly like these children). Sample items include: 'Some kids like the kind of person they are', 'Some kids are often unhappy with themselves' (reversely scored) and 'Some kids are very happy being the way they are'. The SPPC is a widely used, reliable and valid measure of self-perceived competence and self-worth in children (Harter, 1985). In the present sample, Cronbach's  $\alpha$  for the global self-worth subscale was .77.

#### *Individual testing part*

In the second part of the study, children were tested individually by an experimenter in a quiet room at their own school. First, procedures to assess bias in perceived social preference were administered. Then, peer nominations to assess children's propensity to employ externalizing shame responses were gathered. Finally, the additional self-report measure of externalizing shame responding was administered. Prior to testing, children were assured that all their answers would remain confidential. Afterwards, they were explicitly asked not to share answers with their peers. By the end of the assessment, children played a computer game and received a small gift in order to distract their attention from the previous assignments.

#### *Perceptual bias of social preference*

To determine perceptual bias of social preference, procedures outlined by David and Kistner (2000) were followed. First, children's actual social preference was assessed using a sociometric rating procedure. Children were provided with a roster list with the names of all classmates and were asked to rate how much they liked each classmate, using a 5-point Likert scale (−2, do not like at all to +2, like very much). Sociometric ratings provide direct, face-valid and detailed information on the social relations in

classrooms and have good test-retest reliability (e.g. Bukowski, Sippola, Hoza, & Newcomb, 2000; Hymel, Vaillancourt, McDougall, & Renshaw, 2002). Subsequent to the sociometric ratings, children were provided with a similar roster list, but this time they were asked to predict (on the same 5-point Likert scale) the ratings they would receive from each classmate. This allowed straightforward comparison between children's actual and perceived social preference. Both, the actually received and the predicted ratings were summed, averaged and within-class standardized to yield measures for actual social preference as well as perceived social preference. Then, perceptual bias was determined by regressing children's perceived social preference score onto their actual social preference score. Standardized residual values were saved and used as index of children's perceptual bias of social preference. These residual values represented the variance that remained in children's self-perceptions after the reality component in their self-perceptions was removed, where positive values reflected overestimation, and negative values reflected underestimation of social preference. Computing residual values as index of perceptual bias has become the standard in this field (e.g. Brendgen *et al.*, 2004; Cole *et al.*, 1998).

*Externalizing shame responses: Peer nominations*

A peer nomination measure of externalizing shame responses was developed for this study. Items were derived from children's autobiographical narratives of shameful experiences collected in a preliminary study (Thomaes, 2006). We identified the most commonly described externalizing shame responses and converted them into three items. Both situation and response were described in general terms (as opposed to the more specific scenario-based instrument descriptions), because we believe that such descriptions are most reliably judged by peers. The following items were included: 'These kids flare up quickly, for example, when someone makes fun of them'; 'These kids lose their temper when they themselves have made a mistake'; 'These kids quarrel easily, for example, when someone says they have done something wrong'. Children were provided with a roster list that contained the names of all classmates in randomized order. After the experimenter had read one of the items aloud, children were asked to name up to five classmates who best fit the description read to them. They were not allowed to name themselves. The nominations children received were summed and divided by number of classmates to yield a total score that indicates peer-perceived proneness to respond in externalizing ways to shameful situations. Cronbach's  $\alpha$  was .92.

*Externalizing shame responses: Additional self-report*

Because we wanted to be able to compare the above peer-report measure with an identical self-report measure, we let children judge themselves on the 'peer nominations items' as well. The three items were administered as a short paper-and-pencil measure. A sample item includes; 'Some kids flare up quickly, for example, when someone makes fun of them' (compare the first peer nomination item). Children were asked to indicate to what extent they are similar to these children, using a 4-point Likert scale (0, I am not like these children at all to 3, I am exactly like these children). Principal components analysis revealed that a single dimension was underlying the items (based on a criterion eigenvalue of 1.0 and inspection of the scree plot). Factor 1 explained 55% of the variance. Cronbach's  $\alpha$  for this 3-item self-report measure was .60.

## Results

### Descriptive statistics

The relevant means and standard deviations for the scenario-based instrument, the peer nomination measure and the additional self-report measure of externalizing shame responding are presented in Table 1. It also contains the means and standard deviations for the others measures included in the study.

**Table 1.** Mean scores and standard deviations of the measures included in the study

Measures	Range	<i>M</i>	<i>SD</i>
Scenarios	0–4	1.40	0.90
Boys		1.56	1.01
Girls		1.25	0.77
Peer nominations <sup>a</sup>	0–27	2.09	3.19
Boys		3.47	4.14
Girls		0.88	1.05
Additional self-report	0–3	0.63	0.46
Boys		0.71	0.50
Girls		0.57	0.41
Narcissism	0–1	0.20	0.17
Boys		0.25	0.20
Girls		0.16	0.12
Actual preference <sup>b</sup>	–2–2	0.25	0.62
Boys		0.09	0.67
Girls		0.39	0.53
Perceived preference <sup>b</sup>	–2–2	0.23	0.41
Boys		0.28	0.38
Girls		0.18	0.44
Global self-worth	0–3	2.36	0.50
Boys		2.35	0.52
Girls		2.36	0.49

<sup>a</sup>Total number of received nominations per item, not divided by number of classmates. Classes varied from 21 to 28 participating children.

<sup>b</sup>Scores are not within-class standardized.

Boys scored marginally significantly or significantly higher than girls on the three externalizing shame response measures (scenario-based instrument:  $F(1, 120) = 3.74$ ,  $p < .10$ ,  $d = .35$ ; peer nomination measure:  $F(1, 120) = 23.74$ ,  $p < .01$ ,  $d = .86$ ; additional self-report measure:  $F(1, 117) = 2.85$ ,  $p < .10$ ,  $d = .31$ ).

### Narcissism and externalizing shame responses

Preliminary analysis revealed a significant gender difference in narcissism. Consistent with findings from adult studies (Foster, Campbell, & Twenge, 2003), boys' narcissism scores were higher than those of girls ( $F(1, 120) = 8.59$ ,  $p < .01$ ,  $d = .54$ ). Narcissism was unrelated to global self-worth ( $r = .08$ ,  $ns$ ). Although interpretation of null-findings is inherently difficult, our data seem to underline the view that narcissism and self-esteem are separate constructs, and that narcissism is not simply an exaggerated form of high self-esteem.

The first hypothesis was that narcissistic children are prone to respond in externalizing ways to shame situations. Correlations were computed between narcissism and the three externalizing shame response measures. Results are presented in Table 2. Narcissism was significantly positively correlated with externalizing shame responding on all the three measures, suggesting indeed that the more narcissistic children are, the more they engage in externalizing responses to shame, as indicated both by children themselves and their peers. Anticipating the possible alternative explanation that it is simply (high) self-esteem that is associated with externalizing shame responding, additional correlations were computed between global self-worth and the externalizing shame response measures. Unlike narcissism, global self-worth was unrelated, and in one case (additional self-report) even negatively related to externalizing shame responding. Possible interactions between narcissism or global self-worth and gender were tested within regression analysis, following recommendations by Aiken and West (1991). None of the relations reported in Table 2 were moderated by gender. In sum, across various measures, the results were consistent with our hypothesis, suggesting that narcissism, and not global self-worth, predisposes children to respond in externalizing ways to shame situations.

**Table 2.** Correlations between narcissism and the externalizing shame response measures

Form of self-regard	Externalizing shame response measures		
	Scenarios	Peer nominations	Additional self-report
Narcissism	.31**	.25**	.20*
Global self-worth	.02	-.11	-.23*

\* $p < .05$ ; \*\* $p < .01$ .

#### **Perceptual bias of social preference and externalizing shame responses**

Correlations were computed between perceptual bias and children's proneness to respond in externalizing ways to shame. Contrary to expectation, perceptual bias was unrelated to all three measures of externalizing shame responding. However, closer inspection revealed a problem in the determination of perceptual bias for our data. Recall that perceptual bias was statistically approached as the variance that remains in children's perceived social preference scores after the reality component in those perceived social preference scores, i.e. their actual social preference scores, has been removed. However, only a modest correlation was found between children's perceived social preference scores and their actual social preference scores ( $r = .28, p < .01$ ). The reality component accounted for only 8% of the variance in children's self-perceptions<sup>2</sup>. As a result, removing the reality component from children's self-perceptions hardly affected the latter scores. Indeed, the residual values that were supposed to index perceptual bias actually correlated almost perfectly ( $r = .96$ ) with children's original perceived social preference scores. In sum, the reality component in children's self-perceptions was too small to be able to determine a meaningful index of perceptual bias. Therefore, we choose not to use residual values as indices of perceptual bias in this study.

<sup>2</sup> This finding diverges from a previous study by David and Kistner (2000), who used identical measurement procedures but found considerably more shared variance between children's perceived social preference and their actual social preference.

However, our data did give clear occasion to consider the associations between actual and perceived social preference and the externalizing shame response measures independently. Correlations are presented in Table 3. Perceived social preference was related to none of the externalizing shame response measures. With regard to actual social preference, the strong negative relation to the peer nomination measure stands out in particular. Also, negative (cross-informant) relations were found between actual social preference and the two self-report measures of externalizing shame responding, although the correlation with the scenario-based instrument did not reach significance. Gender did not moderate any of the relations reported in Table 3. In sum, our data suggest that children who are prone to respond in externalizing ways to shame are not liked by peers, while these children's low social preference is not reflected in their self-perceptions.

**Table 3.** Correlations between actual and perceived social preference and the externalizing shame response measures

	Externalizing shame response measures		
	Scenarios	Peer nominations	Additional self-report
Actual social preference <sup>a</sup>	-.13	-.53**	-.24*
Perceived social preference <sup>a</sup>	-.07	-.09	-.03

<sup>a</sup>Scores are within-class standardized.

\* $p < .05$ ; \*\* $p < .01$ .

## Discussion

Recent research interest in the emotional processes underlying children's aggression has revolved around the inadequate regulation of anger. We believe it can be valuable to broaden our view, as insights from the clinical literature suggest that shameful exposure can instigate externalizing responses of humiliated fury. In order to promote our understanding of externalizing shame responses, we tested the assumption that they are typically employed by children who hold fragile forms of positive self-esteem. Consistent with the first hypothesis, across different ways of measuring, we showed that narcissistic children are prone to respond in externalizing ways to shame situations. In addition, we found that narcissism diverged in important ways from 'normal' self-esteem. The constructs were unrelated to each other, and most notably, were differentially related to the measures of externalizing shame responding. These results corroborate the expectation that it is narcissistic self-regard, and not just high self-esteem, that is, critically involved in children's proneness to aggress when faced with shame. This finding extends research in adult samples showing that specifically individuals with narcissistic self-regard react aggressively when faced with ego-threatening circumstances (e.g. Bushman & Baumeister, 1998; Stucke & Sporer, 2002; Twenge & Campbell, 2003). In addition, this finding dovetails with previous findings that narcissism is associated with emotional and behavioural problems in childhood (Barry *et al.*, 2003; Frick *et al.*, 2000; Washburn *et al.*, 2004).

As noted before, self-esteem and narcissism have been distinguished by the suggestion that the former is a cognitive, evaluative construct whereas the latter is emotion-laden (Barry *et al.*, 2003; Bushman & Baumeister, 1998; Kernberg, 1975). It is

asserted that individuals holding positive self-esteem actually think well of themselves, while individuals holding narcissistic personality traits strongly desire to think well of themselves. As such, our results suggest that children who are emotionally invested in grandiose self-views tend to adopt externalizing response strategies in shame situations. Morf and Rhodewalt (2001) depicted narcissism as a personality process of motivated self-construction that is centred around the goal of creating or maintaining a desired, grandiose self. Shameful exposure thwarts this goal by (publicly) highlighting negative aspects of the self and inflicting an unwanted identity. This explains why narcissists are strongly motivated to preserve themselves from 'being shamed'. As Morf and Rhodewalt (2001, p. 178) wrote: 'narcissists are quick to perceive (or even impose) self-esteem implications in situations that leave room for it and then engage in characteristic social-cognitive-affective dynamic self-regulatory strategies to maintain self-worth.' Accordingly, externalizing shame responses can be understood as self-regulation strategies, triggered when one's desired self is undermined, which are typical for narcissistic individuals. They function to distance the self from an unwanted identity, and to protect the self against losing worth.

With regard to our second hypothesis, data were less straightforward to interpret. Children's perceived social preference appeared to be insufficiently grounded in reality to be able to determine a meaningful index of perceptual bias. Aside from that issue, our data were most clear in suggesting that children who are prone to respond in externalizing ways to shame are not liked by their peers. This observation is in line with several findings indicating that children who have a low peer status evince high levels of reactive aggression (e.g. Poulin & Boivin, 2000; Price & Dodge, 1989). A common explanation is that reactively aggressive children's maladaptive interpersonal behaviour styles (e.g. they show deficient problem solving skills and low levels of prosocial behaviour) make them unpopular among peers (Poulin & Boivin, 2000; Rudolph & Clark, 2001).

In contrast to children's actual social preference, their perceived social preference was found to be unrelated to externalizing shame responding. This may suggest that children who are prone to employ externalizing shame responses fail to acknowledge their low social preference. Because of the cross-sectional design of the study and because one result did not reach significance, this formulation should be treated with appropriate prudence. Still, our data seem consistent with a number of studies that have documented that the social self-concepts of aggressive children are biased relative to the opinions of others (Hughes *et al.*, 1997; Patterson, Kupersmidt, & Griesler, 1990; Rudolph & Clark, 2001). Aggressive children's social self-perceptions are inflated to the extent that, despite these children's social difficulties, their self-perceptions do *not* differ from those of non-aggressive children. Thus, our data may suggest that children who tend to respond in externalizing ways to shame engage in biased social reasoning insofar as their low social standing is not reflected in their self-perceptions.

The general expectation tested in the present study was that children holding fragile forms of positive self-esteem tend to deal aggressively with shame situations. We found such inclinations to be higher among narcissistic children and (although tentatively) among children who are low in social preference, who did not appear to fully acknowledge their rejected status. Interestingly, we did *not* find that these children had exceptionally high self-esteem, or viewed themselves as having exceptionally high social standings. Thus, our findings do not indicate that children who are prone to respond aggressively to shame situations actually view themselves highly positively. Rather, these children seem to use a self-aggrandizing style, which is generally thought to reveal a



defensive kind of self-regard (e.g. Hughes *et al.*, 1997; Rudolph & Clark, 2001; Salmivalli, 2001). Children who hold defensive self-regard take a self-protective posture in their social worlds, and actively guard themselves against social information that may cause them to lose face. Thus, it may be most accurate to infer that the self-regard of children who tend to respond in externalizing ways to shame is defensive, without making specific reference to its valence.

Throughout this article, it has been argued that externalizing shame responses can be understood as attempts to maintain a desired identity after the self has been confronted with an unflattering reality. Whether, or to what extent these attempts succeed, however, remains unclear. It is possible that externalizing shame responses do not fully guard the self from harm, but merely function to limit further damage once the self has been harmed already. Indeed, some authors have suggested that externalizing shame responses function to reactivate an impaired self (Tangney, Wagner, Fletcher, & Gramzow, 1992; Tangney, Wagner, Hill-Barlow, Marschall, & Gramzow, 1996). Germane to this issue is the question to what extent it is actually felt shame that gives rise to externalizing responses. In the analytic writings of Lewis (1971), it was noted that humiliated fury can surface when the painful affect of shame is held out of consciousness or is 'bypassed'. In Baumeister *et al.*'s model, the experience of internalized negative affect such as shame is avoided by engaging in the aggressive response path. In contrast, Tangney and colleagues (1992, 1996) interpreted their empirical evidence to conclude that it is the actual (i.e. consciously reported) experience of shame that motivates anger and aggression. Thus, there is no consensus with regard to how the affect of shame that is underlying aggression exactly reveals itself, the main ambiguity being the extent to which it is consciously experienced. For this study, we deliberately choose to circumvent this issue by investigating externalizing responses to shame *situations*, as opposed to examining the exact affective processes that might mediate these responses. Further research is needed to illuminate these affective processes (whether on conscious or on less conscious levels), and as a related issue, to examine to what extent externalizing shame responses really are effective in warding off damage to the self.

Some limitations of this study should be noted. First, our data do not speak to children's actual behaviours when faced with an *in vivo* shameful event. There is evidence to suggest that individuals' anticipated responses to emotionally arousing situations do not necessarily correspond well to their actual behaviour in naturalistic settings (Mize & Ladd, 1988; Reijntjes, Stegge, Terwogt, Telch, & Kamphuis, 2006; Robinson & Clore, 2002). As argued by Robinson and Clore, the former are based on 'semantic knowledge', that is, beliefs about how (emotion-eliciting) events affect one's behaviour, which differ from the experiential cues that motivate actual behaviour. We tried to deal with this issue by including peer reports in our study. Still, it may be important to corroborate our findings by examining children's spontaneous aggressive responses to *in vivo* shameful exposure, insofar as ethical considerations do not preclude such an approach.

Second, the cross-sectional nature of our data does not allow for drawing developmental inferences. In line with the theoretical assumptions of this study, we consider the most plausible interpretation of our findings to be that children's defensive self-regard (be it manifested by narcissistic traits, or by ill-founded social self-perceptions) determines their tendencies towards externalizing shame responding. However, it would be interesting to use prospective designs to find out whether both traits affect each other throughout development. One alarming trajectory of reciprocal influence that can be

anticipated is that defensively oriented children's aggressive solutions for shame-imposing interactions may take them further away from the identity they want to create. The experience of shame serves important functions in motivating oneself to conform to social norms. Therefore, the non-experience of shame may undermine children's acceptance and, importantly, may hinder their motivation to behavioural change. Consequently, children who tend to regulate shame aggressively may become increasingly at risk to further shaming. It is possible that these children face those aversive experiences by even more persistently attempting to keep their self-regard free from negative burden, thereby becoming entrapped in chronic cycles of shame-victimization and aggression (see also Hughes *et al.*, 1997; Rudolph & Clark, 2001).

One objective for investigating aggressive shame regulation early in development was to contribute to the refinement of interventions aimed at preventing children from becoming entangled in possibly enduring maladaptive behaviour patterns. We believe that a promising goal for intervention would be to teach children who are predisposed to aggressive shame regulation to benefit from the regulatory functions of shame. Towards this end, it may prove to be effective to assist aggressive children to develop alternative, more adaptive and prosocial strategies to deal with shame. Probably even prerequisite to behaviour modification or social skills training, however, is to intervene with children's self-regard. Our study implies that intervention strategies aimed at enhancing children's self-esteem can have negative side-effects if the result is a kind of inflated, defensive self-regard. We believe that aggression interventions should be aimed at working with children towards a genuine, that is, non-defensive self-concept that harbours both positive and negative aspects of the self which are acquired by unobstructed processing, which the child is aware of, and which the child can act upon freely (Kernis, 2003). We hope that researchers will continue to explore the complex interrelations between shame, aggression and self-regard, as this promises to yield new insights in the maladaptive emotion regulation processes that underlie children's behaviour problems, and may provide pathways towards more effective interventions with the aggressive behaviour of socially vulnerable children.

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## **Appendix**

### **Scenarios**

(1) You are having a birthday party. When everybody has arrived, you put on your favorite music. Then one of your classmates says: 'That's baby music, can't you put on something else?'

- I would tell him/her to shut up.

(2) Together with some classmates, you enter school after break. Then, one of them makes a silly joke about your haircut, and everyone starts laughing loud.

- I would start to fight him/her.

(3) Someone is making you look like a fool in front of all your classmates.

- I would get back at him/her by making a mean joke.

(4) You are very happy with your newly bought sweater. When you enter school, another kid says: 'What are you wearing?! Your grandma must have made it.'

- I would beat him/her.

(5) In class, your teacher is asking you a tough question. In the middle of your answer, everyone starts laughing at you.

- I would yell at my classmates to shut up.



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